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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself | | | |
|-----|--|---|--|-----------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Join | nt Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Staci First name Marie Middle name | First name Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Brannon Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you hav used in the last 8 years | е | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1435 | | |

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Debtor 1 Staci Marie Brannon

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | doing business as names | EINs | EINs |
| | | LINS | LIIVS |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 917 E Maize Rd | |
| | | Ridott, IL 61067 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Stephenson | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Debtor 1 Staci Marie Brannon

| ⊃ar | Tell the Court About | Your Ba | ankruptcy Ca | ise | | | |
|-----|---|---------|----------------|--------------------------------------|--|---|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see Notice Require f page 1 and check the appro | | r Individuals Filing for Bankruptcy |
| | choosing to file under | ■ Cł | napter 7 | | | | |
| | | ☐ Ch | napter 11 | | | | |
| | | ☐ Ch | napter 12 | | | | |
| | | □ Cł | napter 13 | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is sub | pically, if you are paying the fe | ee yourself, you may pay w | e in your local court for more details with cash, cashier's check, or money pay with a credit card or check with |
| | | | | | tallments. If you choose this ts (Official Form 103A). | option, sign and attach the | e Application for Individuals to Pay |
| | | | but is not req | uired to, waive ur family size ar | your fee, and may do so only | if your income is less than fee in installments). If you | for Chapter 7. By law, a judge may, a 150% of the official poverty line that choose this option, you must fill out le it with your petition. |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No | | | | | |
| | | | District | | When | Case n | umber |
| | | | District | | When | Case n | umber |
| | | | District | | When | Case n | umber |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ No | | | | | |
| | armate: | | Debtor | | | Relation | ship to you |
| | | | District | - | When | | mber, if known |
| | | | Debtor | | | Relations | ship to you |
| | | | District | | When | Case nu | mber, if known |
| 11. | Do you rent your residence? | ■ No | | ine 12. | ained an eviction judgment a | rainet vau? | |
| | | ☐ Ye | | No. Go to line | | yamsı you : | |
| | | | | | nitial Statement About an Evic | tion Judgment Against You | u (Form 101A) and file it as part of |

| Deb | Case 18-8 otor 1 Staci Marie Brann | | Doc 1 | Filed 03/15/18 Document | Entered 03/15/18 14:30:14 Page 4 of 52 Case number (if known) | Desc Main |
|-----|---|------------|---------------------|--|--|------------------------------------|
| Par | t 3: Report About Any Bu | sinesses Y | ou Own a | s a Sole Proprietor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Pa | art 4. | | |
| | | ☐ Yes. | Name a | nd location of business | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of | business, if any | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number | , Street, City, State & ZIP | Code | |
| | it to this petition. | | Check tl | ne appropriate box to des | cribe your business: | |
| | | | | Health Care Business (as | defined in 11 U.S.C. § 101(27A)) | |
| | | | | Single Asset Real Estate (| (as defined in 11 U.S.C. § 101(51B)) | |
| | | | | Stockbroker (as defined in | n 11 U.S.C. § 101(53A)) | |
| | | | | Commodity Broker (as de | fined in 11 U.S.C. § 101(6)) | |
| | | | <u> </u> | None of the above | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines. | If you indic | cate that you are a small ly statement, and federal in | ust know whether you are a small business de business debtor, you must attach your most re ncome tax return or if any of these documents | ecent balance sheet, statement of |
| | For a definition of small | ■ No. | I am not | filing under Chapter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filin Code. | g under Chapter 11, but I | am NOT a small business debtor according t | o the definition in the Bankruptcy |
| | | ☐ Yes. | I am filin | g under Chapter 11 and I | am a small business debtor according to the | definition in the Bankruptcy Code. |

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| INO. | |
|------|--|
| | |
| | |

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Staci Marie Brannon

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 52 Case number (if known) Document Debtor 1 Staci Marie Brannon Part 6: Answer These Questions for Reporting Purposes 16. What kind of debts do 162 Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts I am not filing under Chapter 7. Go to line 18. 17. Are you filing under □ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? **1**,000-5,000 18. How many Creditors do **25.001-50.000 1-49** you estimate that you **5001-10,000 50,001-100,000 50-99** owe? **10,001-25,000** ■ More than 100,000 **100-199 200-999** 19. How much do you ☐ \$1.000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50.000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1.000.000.001 - \$10 billion **550.001 - \$100.000** be worth? □ \$50,000,001 - \$100 million ☐ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1.000.000.001 - \$10 billion **\$50.001 - \$100.000** to be? ☐ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion ☐ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. and making a false statement, concealing property, or obtaining money or property by fraud in connection with a y case can result in thes up to \$250,000, or imprisonment for up to 20 years. or both. 18 U.S.C. & 152. 1341. I underst nes up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, bankrup and 3 Signature of Debtor 2 Staci Warie Brannoi Signature of Debtor 1 Executed on Executed on MM / DD / YYYY

Case 18-80546

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Debtor 1 Staci Marie Brannon

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Date

Bernard J. Natale 2018683 Illinois

Printed name

Bernard J. Natale, Ltd

Firm name

Edgebrook Office Center 1639 N. Alpine Road, Suite 401 Rockford, IL 61107

Number, Street, City, State & ZIP Code

Contact phone (815) 964-4700

Email address

natalelaw@bjnatalelaw.com

2018683 Illinois IL

Bar number & State

| | | IAMAIIIN | | |
|---------------------|------------------------|-------------------|-------------|--|
| Fill in this inform | ation to identify your | case: | | |
| Debtor 1 | Staci Marie Branı | non | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ban | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|--|--------------|-------------------------|
| | | Your as | ssets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 17,627.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 17,627.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | abilities you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 1,225.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 44,377.58 |
| | Your total liabilities | \$ | 45,602.58 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,050.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,025.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | edules. |
| 7. | Yes What kind of debt do you have? | | |
| | Vous debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | o porconal | family or |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 9 of 52 Case number (if known) Debtor 1 Staci Marie Brannon

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

2,877.74 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 1,225.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 33,464.94 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 34,689.94 |

| EDITOR OF THE COLUMN | | | t Page 10 of 52 | | |
|---|---|---|--|----------------------|--|
| FIII in this infor | mation to identify you | r case and this filing: | | | |
| Debtor 1 | Staci Marie Brai | nnon | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF | - ILLINOIS | | |
| Case number | | | | | Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Official Fo | rm 106A/B | | | | |
| _ | | oortv | | | 40/45 |
| | e A/B: Pro | | K | | 12/15 |
| think it fits best. E | Be as complete and accur re space is needed, attac | rate as possible. If two married | ee. If an asset fits in more than one category, list the epople are filing together, both are equally responsib On the top of any additional pages, write your name a | le for supply | ing correct |
| Part 1: Describe | Each Residence, Buildin | ng, Land, or Other Real Estate Y | ou Own or Have an Interest In | | |
| 1. Do you own or | have any legal or equitab | le interest in any residence, bu | ilding, land, or similar property? | | |
| No. Go to Pa | rt 2. | | | | |
| ☐ Yes. Where | is the property? | | | | |
| Part 2: Describe | Your Vehicles | | | | |
| Part 2. | Tour vollioloo | | | | |
| someone else dri | ves. If you lease a vehi | | cles, whether they are registered or not? Include G: Executory Contracts and Unexpired Leases. | e any vehicl | es you own that |
| ∢ Cars vans tr | | | | | |
| o. Ouro, vario, tr | ucks, tractors, sport u | ıtility vehicles, motorcycles | | | |
| ■ No | ucks, tractors, sport u | ıtility vehicles, motorcycles | | | |
| _ | rucks, tractors, sport i | utility vehicles, motorcycles | | | |
| ■ No | ucks, tractors, sport (| utility vehicles, motorcycles | | | |
| ■ No □ Yes 4. Watercraft, a | ircraft, motor homes, <i>i</i> | ATVs and other recreational | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories | | |
| No Yes 4. Watercraft, ai Examples: Boa | ircraft, motor homes, <i>i</i> | ATVs and other recreational | l vehicles, other vehicles, and accessories | | |
| ■ No □ Yes 4. Watercraft, ai Examples: Boo | ircraft, motor homes, <i>i</i> | ATVs and other recreational | l vehicles, other vehicles, and accessories | | |
| No Yes 4. Watercraft, ai Examples: Boa | ircraft, motor homes, <i>i</i> | ATVs and other recreational | l vehicles, other vehicles, and accessories | | |
| ■ No □ Yes 4. Watercraft, ai Examples: Boo | ircraft, motor homes, <i>i</i> | ATVs and other recreational | l vehicles, other vehicles, and accessories | | |
| ■ No □ Yes 4. Watercraft, ai Examples: Boa ■ No □ Yes | ircraft, motor homes, A | ATVs and other recreational sonal watercraft, fishing vesse | l vehicles, other vehicles, and accessories | | \$0.00 |
| No Yes 4. Watercraft, ai Examples: Boa No Yes 5 Add the dollar | ircraft, motor homes, ats, trailers, motors, per | ATVs and other recreational sonal watercraft, fishing vesse | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories | | \$0.00 |
| ■ No □ Yes 4. Watercraft, ai Examples: Boa ■ No □ Yes 5 Add the dolla pages you have | ircraft, motor homes, and trailers, motors, personals, trailers, motors, personals, and the portion ave attached for Part 2 | ATVs and other recreational sonal watercraft, fishing vesse you own for all of your entreast | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories | | \$0.00 |
| ■ No □ Yes 4. Watercraft, ai Examples: Boa ■ No □ Yes 5 Add the dolla pages you he Part 3: Describe | ircraft, motor homes, and trailers, motors, personal ar value of the portion ave attached for Part 2 | ATVs and other recreational sonal watercraft, fishing vesse you own for all of your entreatments | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories ries from Part 2, including any entries for | C | <u> </u> |
| ■ No □ Yes 4. Watercraft, ai Examples: Boa ■ No □ Yes 5 Add the dolla pages you he Part 3: Describe | ircraft, motor homes, and trailers, motors, personal ar value of the portion ave attached for Part 2 | ATVs and other recreational sonal watercraft, fishing vesse you own for all of your entreast | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories ries from Part 2, including any entries for | porti Do n | \$0.00 The ent value of the ion you own? ot deduct secured as or exemptions. |
| No Yes 4. Watercraft, ai Examples: Boa No Yes 5 Add the dolla pages you have Part 3: Describe Do you own or 6. Household gr Examples: Ma | ar value of the portion ave attached for Part 2 Your Personal and Hou have any legal or equi | ATVs and other recreational sonal watercraft, fishing vesse you own for all of your entreatments | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories ries from Part 2, including any entries for | porti Do n | ent value of the ion you own? ot deduct secured |
| No Yes 4. Watercraft, ai Examples: Boa No Yes 5 Add the doll pages you he Part 3: Describe Do you own or 6. Household ge Examples: Ma | ar value of the portion ave attached for Part 2 Your Personal and Hou have any legal or equi | ATVs and other recreational sonal watercraft, fishing vesse you own for all of your entread where the contract of the fit and | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories ries from Part 2, including any entries for | porti Do n | ent value of the ion you own? |
| No Yes 4. Watercraft, ai Examples: Boa No Yes 5 Add the dolla pages you have Part 3: Describe Do you own or 6. Household gr Examples: Ma | ar value of the portion ave attached for Part 2 Your Personal and Hou have any legal or equi | ATVs and other recreational sonal watercraft, fishing vesse you own for all of your entread where the contract of the fit and | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories ries from Part 2, including any entries for sollowing items? | porti Do n | ent value of the ion you own? ot deduct secured |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

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Case number (if known) Document Debtor 1 Staci Marie Brannon

| | Normal complement of home electronics | \$500.00 |
|---|--|---|
| other collect ■ No | d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin tions, memorabilia, collectibles | n, or baseball card collections; |
| ☐ Yes. Describe 9. Equipment for sports Examples: Sports, phore musical inst ■ No | tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | and kayaks; carpentry tools; |
| No | es, shotguns, ammunition, and related equipment | |
| ☐ Yes. Describe 11. Clothes Examples: Everyday of No Yes. Describe | clothes, furs, leather coats, designer wear, shoes, accessories | |
| | Normal complement of clothing | \$300.00 |
| □ No ■ Yes. Describe | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, marked to the second se | \$300.00 |
| Examples: Dogs, cats No Yes. Describe | , birds, horses | |
| | 1 dog; 4 cats | \$50.00 |
| 14. Any other personal a ■ No □ Yes. Give specific in | nd household items you did not already list, including any health aids you did not list | |
| | e of all of your entries from Part 3, including any entries for pages you have attached t number here | \$2,150.00 |
| Part 4: Describe Your Fina | ncial Assets | |
| | legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash Examples: Money you □ No | u have in your wallet, in your home, in a safe deposit box, and on hand when you file your petit | ion |

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document

Debtor 1 Staci Marie Brannon

| | | | Cash | \$11.00 |
|-----|--|--|---|---------------------|
| 17. | institutions. If | ngs, or other financial accounts; you have multiple accounts with t | certificates of deposit; shares in credit unions, brokerage houses, and the same institution, list each. | d other similar |
| | □ No ■ Yes | | Institution name: | |
| _ | | 17.1. Checking | US Bank | \$8.00 |
| | | 17.2. Savings | US Bank | \$1.00 |
| 18. | □ No | | ge firms, money market accounts | |
| | ■ Yes | 1 share of US Bank s | | \$56.00 |
| | | | | |
| 19. | joint venture | k and interests in incorporated | d and unincorporated businesses, including an interest in an LLC | ;, partnership, and |
| | ■ No □ Yes. Give specific inform | mation about them | | |
| | • | Name of entity: | % of ownership: | |
| 20. | Negotiable instruments in | clude personal checks, cashiers' | e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them. | |
| | ■ No | and an about the sec | | |
| | ☐ Yes. Give specific inform | lssuer name: | | |
| 21. | Retirement or pension ac Examples: Interests in IRA | | , thrift savings accounts, or other pension or profit-sharing plans | |
| | Yes. List each account s | eparately. Type of account: | Institution name: | |
| | | 401(k) | US Bank | \$6,800.00 |
| | | Pension (defined benefit) | US Bank | \$8,000.00 |
| 22. | Examples: Agreements w | deposits you have made so that y | you may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or other | ers |
| | ■ No □ Yes | | Institution name or individual: | |
| 23. | • | a periodic payment of money to y | ou, either for life or for a number of years) | |
| | ■ No □ YesIssue | er name and description. | | |
| 24. | . Interests in an education 26 U.S.C. §§ 530(b)(1), 529 | | ed ABLE program, or under a qualified state tuition program. | |
| | ■ No □ YesInstit | tution name and description. Sep | parately file the records of any interests.11 U.S.C. § 521(c): | |

| | | Case 18-80546 | Doc 1 | Filed 03/15/18 Document | Entered 03/15 Page 13 of 52 | 5/18 14:30:14 | Desc M | lain |
|-----|------------------------|---|---|---|--------------------------------|---------------------------|-----------------------|---|
| De | ebtor 1 | Staci Marie Branno | n | Document | | ase number (if known) | | |
| 25. | Trusts | , equitable or future inte | rests in prope | erty (other than anythin | g listed in line 1), and | rights or powers exe | ercisable for | your benefit |
| | | Give specific information | about them | | | | | |
| 26. | | s, copyrights, trademarl ples: Internet domain nam | | | | s | | |
| | ☐ Yes. | Give specific information | about them | | | | | |
| | Exam _l ■ No | ses, franchises, and other ples: Building permits, exc Give specific information | lusive licenses | | n holdings, liquor licenso | es, professional licens | es | |
| | | property owed to you? | | | | | portion Do not | at value of the n you own? deduct secured or exemptions. |
| | □ No | funds owed to you Give specific information | about them, in | cluding whether you alre | ady filed the returns and | d the tax years | | |
| | | | 201 | 7 Tax Refunds, but s for 2015 & 2016 pas | | Federal and Sta | ate | \$600.00 |
| 30. | Other Example No Yes. | amounts someone owes oles: Unpaid wages, disable benefits; unpaid loar Give specific information sts in insurance policies | s you ility insurance is you made to | someone else | | | | al Security |
| | □ No | oles: Health, disability, or | | , | HSA); credit, nomeowne | er's, or renter's insurai | nce | |
| | ■ Yes. | Name the insurance com | pany of each p mpany name: | policy and list its value. | Beneficiary | <i>y</i> : | Surre value | nder or refund |
| | | Er | nployer prov | vided term insurance | Self | | | \$1.00 |
| | If you somed | terest in property that is are the beneficiary of a live one has died. Give specific information | ing trust, expe | | | urrently entitled to rec | eive property | because |
| 33. | | s against third parties, woles: Accidents, employments | | | | or payment | | |
| | ☐ Yes. | Describe each claim | | | | | | |
| 34. | ■ No | contingent and unliquid Describe each claim | | f every nature, including | g counterclaims of the | e debtor and rights to | set off clai | ms |
| Off | | m 106A/B | | Schedule A/B: F | Property | | | page 4 |

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Case number (if known) Document Debtor 1 Staci Marie Brannon 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$15,477.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$2,150.00 Part 4: Total financial assets, line 36 \$15,477.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

Official Form 106A/B Schedule A/B: Property page 5

\$17,627.00

Copy personal property total

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$17,627.00

\$17,627.00

| Fill in this information to identify your case: | | | | | | |
|---|-------------------|-------------------|-------------|--|--|--|
| Debtor 1 | Staci Marie Branı | non | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (ii kilowii) | | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property | ' You Claim as Exempt |
|-------------------------------|-----------------------|
|-------------------------------|-----------------------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| 5 ILCS 5/12-1001(b) |
|---------------------|
| |
| 5 ILCS 5/12-1001(b) |
| |
| 5 ILCS 5/12-1001(a) |
| |
| 5 ILCS 5/12-1001(b) |
| |
| 5 ILCS 5/12-1001(b) |
| |
| |

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Case Number (if known)

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | |
|----|---|--------------------------------------|---------|---|------------------------------------|--|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | Checking: US Bank Line from Schedule A/B: 17.1 | \$8.00 | | \$8.00 | 735 ILCS 5/12-1001(b) | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Savings: US Bank Line from Schedule A/B: 17.2 | \$1.00 | | \$1.00 | 735 ILCS 5/12-1001(b) | |
| | Elle Holli Genedale A.B. 1712 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | 1 share of US Bank stock Line from Schedule A/B: 18.1 | \$56.00 | | | 735 ILCS 5/12-1001(b) | |
| | Line from Scriedule AVB: 16.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | 401(k): US Bank Line from Schedule A/B: 21.1 | \$6,800.00 | | | 735 ILCS 5/12-1006 | |
| | Line IIIIII Schedule A/B. 21.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Pension (defined benefit): US Bank Line from Schedule A/B: 21.2 | \$8,000.00 | | | 735 ILCS 5/12-704 | |
| | Line IIIIII Schedule AVB. 21.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Federal and State: 2017 Tax Refunds, but subject to seizure for 2015 & | \$600.00 | | \$600.00 | 735 ILCS 5/12-1001(b) | |
| | 2016 past due taxes Line from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Employer provided term insurance Beneficiary: Self | \$1.00 | | | 735 ILCS 5/12-1001(f) | |
| | Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No | | | led on or after the date of adjustme | nt.) | |
| | Yes. Did you acquire the property cover | ed by the exemption wi | ithin 1 | ,215 days before you filed this case | ? | |
| | □ No □ Yes | | | | | |
| | | | | | | |

| Fill in this information to identify your case: | | | | | | |
|---|-------------------|-------------------|-------------|---|---------------------|--|
| Debtor 1 | Staci Marie Branı | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | Check if this is an | |
| | | | | | amended filing | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | | | Documen | nt Page | 18 of ! | 52 | | |
|------------------------------|--|---|--|--|------------------------------|---|--|----------------------------------|
| Fill | in this inforn | nation to identify your ca | ase: | | | | | |
| Del | otor 1 | Staci Marie Branne | on | | | | | |
| | | First Name | Middle Name | Last Nam | е | | | |
| | otor 2 | First Name | Middle News | Last Name | | | | |
| (Spc | ouse if, filing) | First Name | Middle Name | Last Nam | е | | | |
| Uni | ted States Bar | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | | | |
| Cas | se number | | | | | | | |
| _ | nown) | | | | | | ☐ Check | if this is an |
| | | | | | | | amend | led filing |
| ○ £1 | icial Farm | - 10CE/E | | | | | | |
| | ficial Form | | a Haya Haaaa | rad Claim | _ | | | 40/4E |
| | | | no Have Unsecus Part 1 for creditors with PR | | | | DDIODITY alaims 1 | 12/15 |
| Sche Sche left. nam | edule G: Execu edule D: Credito Attach the Con e and case nun | tory Contracts and Unexpir ors Who Have Claims Secu | nat could result in a claim. A | 6G). Do not incli ce is needed, co | ide any cre | ditors with partially s you need, fill it out, | ecured claims that a number the entries i | are listed in n the boxes on the |
| 1. | Do any credito | ors have priority unsecured | claims against you? | | | | | |
| | ☐ No. Go to P | art 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | identify what typ possible, list the Part 1. If more t | pe of claim it is. If a claim has e claims in alphabetical order than one creditor holds a part | If a creditor has more than on both priority and nonpriority a according to the creditor's nat icular claim, list the other cred | mounts, list that me. If you have no litors in Part 3. | claim here a nore than tw | nd show both priority a | nd nonpriority amoun | ts. As much as |
| | (For an explana | ation of each type of claim, se | e the instructions for this form | in the instruction | booklet.) | Total claim | Priority amount | Nonpriority amount |
| 2.1 | Internal | Revenue Service | Last 4 digits of a | account number | 1435 | \$1,225.00 | \$1,225.00 | |
| | | editor's Name ized Insolvency 2 7346 | When was the de | ebt incurred? | 2015 ar | nd 2016 | | |
| | | Iphia, PA 19101-7346 | As af the data wa | 6:1 - 411-: | : O | Had a const | | |
| | | treet City State Zlp Code d the debt? Check one. | As of the date yo | ou file, the claim | is: Check a | all that apply | | |
| | ■ Debtor 1 o | | ☐ Contingent | | | | | |
| | _ | , | ☐ Unliquidated | | | | | |
| | ☐ Debtor 2 o | • | ☐ Disputed Type of PRIORIT | V | | | | |
| | _ | and Debtor 2 only | | | um: | | | |
| | _ | ne of the debtors and another | ☐ Domestic supp | | | | | |
| | | his claim is for a communi | <u> </u> | | | | | |
| | _ | subject to offset? | | | ury while yo | ou were intoxicated | | |
| | ■ No □ Yes | | Other. Specify | Fodoral or | d Stata I | ncome Taxes | | - |
| | □ res | | | reuerar ar | u State i | ilcome raxes | | |
| Par | t 2: List Al | II of Your NONPRIORITY | Unsecured Claims | | | | | |
| 3. | Do any credito | ors have nonpriority unsecu | red claims against you? | | | | | |
| | | ve nothing to report in this pa | t. Submit this form to the cour | t with your other | schedules. | | | |
| | Yes. | | | | | | | |
| 4. | unsecured clair | m, list the creditor separately | ms in the alphabetical order for each claim. For each claim the other creditors in Part 3.li | listed, identify w | nat type of c | laim it is. Do not list cla | aims already included | in Part 1. If more |

Total claim

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Page 19 of 52 Case number (if know) Debtor 1 Staci Marie Brannon 4.1 \$3,128.00 Bell Capital Last 4 digits of account number unknown Nonpriority Creditor's Name PO Box 1962 When was the debt incurred? Alpharetta, GA 30004-1942 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Loan 4.2 Capital Management Services, LP Last 4 digits of account number 5255 \$241.01 Nonpriority Creditor's Name 698 1/2 S. Ogden Street When was the debt incurred? Buffalo, NY 14206-2317 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collections for US Bank account ending ☐ Yes Other. Specify 4.3 City of Rockford Last 4 digits of account number unknown Unknown Nonpriority Creditor's Name P.O. Box 1221 When was the debt incurred? Rockford, IL 61105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Utility Bill

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Debtor 1 Staci Marie Brannon 4.4 \$202.90 **Creditors Protection Service Inc** Last 4 digits of account number 3081 Nonpriority Creditor's Name 308 W State Street When was the debt incurred? Suite 485 Rockford, IL 61110-0615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections for Ortholllinois ☐ Yes 4.5 Creditors Protection Service Inc Last 4 digits of account number 2982 \$1,816.88 Nonpriority Creditor's Name 308 W State Street When was the debt incurred? Suite 485 Rockford, IL 61110-0615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collections for MercyHealth Rockford ☐ Yes Other. Specify Health Physicians various debts 4.6 **Enhanced Recovery Corporation** Last 4 digits of account number \$748.00 unknown Nonpriority Creditor's Name PO Box 57547 When was the debt incurred? Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections for AT&T DirecTV ☐ Yes

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Debtor 1 Staci Marie Brannon 4.7 \$33,000.00 Federal LoanServicing Credit Last 4 digits of account number 7xxx Nonpriority Creditor's Name PO Box 60610 When was the debt incurred? Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Student Loans 4.8 Fifth Third Bank Last 4 digits of account number Unknown 4xxx Nonpriority Creditor's Name 5050 Kingsley Drive When was the debt incurred? MD1MOC2 Cincinnati, OH 45263 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Mortgage Foreclosure of property located at 3204 Hanover Drive, Rockford, Illinois ☐ Yes Other. Specify (2015-CH-1002) 4.9 7849 First National Collection Bureau Last 4 digits of account number \$560.63 Nonpriority Creditor's Name 610 Waltham Way When was the debt incurred? Sparks, NV 89434 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts Collections for Jefferson Capital Systems LLC for original Creditor, Citi ☐ Yes ■ Other. Specify Bank/Fingerhut account #035779923

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Case number (if know)

Debtor 1 Staci Marie Brannon 4.1 Harris & Harris, Ltd. 2428 \$532.15 Last 4 digits of account number 0 Nonpriority Creditor's Name 111 W. Jackson Blvd When was the debt incurred? Suite 400 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collections for Nicor Gas account ending Other. Specify ☐ Yes Ortholllinois 8548 \$162.32 Last 4 digits of account number Nonpriority Creditor's Name PO Box 78620 When was the debt incurred? Milwaukee, WI 53278-8620 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.1 Portfolio Recovery Associates LLC 5122 \$520.85 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 12914 Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Collections for HSBC Bank Nevada NA ■ Other. Specify (Capital One Bank (USA) NA) ☐ Yes

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Page 23 of 52 Case number (if know) Document Debtor 1 Staci Marie Brannon 4.1 Rock River Water Reclamation Dist unknown Unknown Last 4 digits of account number 3 Nonpriority Creditor's Name 3501 Kishawukee Street When was the debt incurred? Rockford, IL 61109 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility Bill ☐ Yes 4.1 Rockford Health Medical Lab. 5958 \$24.81 Last 4 digits of account number Nonpriority Creditor's Name PO Box 138 When was the debt incurred? Rockford, IL 61105-3619 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify *Medical* ☐ Yes 4.1 Rockford Health Physicians A395 \$188.09 Last 4 digits of account number Nonpriority Creditor's Name 2300 N. Rockton Avenue When was the debt incurred? Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify

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Case number (if know)

Debtor 1 Staci Marie Brannon 4.1 Rockford Mercantile Agency 2480 \$569.98 Last 4 digits of account number 6 Nonpriority Creditor's Name 2502 S. Alpine Road When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collections for Rockford Health ☐ Yes Other. Specify System/RMH 4.1 \$693.58 Southwest Credit Systems, LP 1009 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4120 International Parkway **Suite 1100** Carrollton, TX 75007-1958 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Collections for Com Ed account ending ☐ Yes Other. Specify 8074 4.1 SSM Health/St. Claire Hospital 5804 \$299.23 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Patient Business Services PO Box 28205 Saint Louis, MO 63132 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

Official Form 106 E/F

☐ Yes

■ Other. Specify *Medical*

Page 25 of 52 Case number (if know) Document Debtor 1 Staci Marie Brannon 4.1 State Collection Service 5711 \$766.21 Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 6250 When was the debt incurred? Madison, WI 53716-0250 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collections for Univ of WI Hospital & Clinics and UW Med Foundation Inc d/b/a ☐ Yes ■ Other. Specify **UW Health-Phys** 4.2 \$464.94 States Recovery Systems Inc 6806 Last 4 digits of account number Nonpriority Creditor's Name 2491 Sunrise Blvd When was the debt incurred? Rancho Cordova, CA 95670-4344 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify University of Phoenix 4.2 Stellar Recovery \$133.00 2xxx Last 4 digits of account number Nonpriority Creditor's Name PO Box 48370 When was the debt incurred? Jacksonville, FL 32247 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

□ Debts to pension or profit-sharing plans, and other similar debts
□ Other. Specify Collections for Dish Network

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| | | | | T | otal Claim |
|----------------------|------------|--|------------|---------------------------------------|------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| claims rom Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 4 225 00 |
| TOTTI art i | | • • | | · · · · · · · · · · · · · · · · · · · | 1,225.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 1,225.00 |
| | | | | Т | otal Claim |
| | 6f. | Student loans | 6f. | \$ | 33,464.94 |
| Total | | | | | |
| claims | | | | | 0.00 |
| claims | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6g. 6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6g. 6h. | \$ \$ | 0.00 |
| claims | Ü | you did not report as priority claims | • | · · — | |

| | | 12111111 | | | | |
|---|---------------------|-------------------|-------------|--|--|--|
| Fill in this information to identify your case: | | | | | | |
| Debtor 1 | Staci Marie Brannon | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | | |
| | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

| | | Docume | <u>nt Page 28 (</u> | of 52 | |
|---|--|--|--|--|--|
| Fill in this | s information to identify your | case: | | | |
| Debtor 1 | Staci Marie Bran | non | | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fi | ling) First Name | Middle Name | Last Name | _ | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| _ | | | | | |
| Case num (if known) | nber | | | | ☐ Check if this is an |
| (ii kilowii) | | | | | ☐ Check if this is an amended filing |
| | | | | | ae.a.ag |
| Officia | al Form 106H | | | | |
| | dule H: Your Cod | obtors | | | 40/45 |
| Sche | dule n. Your Cou | eptors | | | 12/15 |
| ■ No □ Ye 2. Wir Arizo ■ No □ Ye 3. In Co in lin Form | thin the last 8 years, have you na, California, Idaho, Louisiana o. Go to line 3. s. Did your spouse, former spoulumn 1, list all of your codeb to 2 again as a codebtor only 106D), Schedule E/F (Officia | u lived in a community property, Nevada, New Mexico, Pur use, or legal equivalent live tors. Do not include your | operty state or territo erto Rico, Texas, Wash with you at the time? spouse as a codebto tor or cosigner. Make | ry? (Community property iington, and Wisconsin.) r if your spouse is filing sure you have listed th | with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| out C | Column 2. | | | | |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cree Check all schedules | ditor to whom you owe the debt |
| | | | | Check all schedules | ο τιατ αρριγ. |
| 3.1 | | | | ☐ Schedule D, line | : |
| | Name | | | ☐ Schedule E/F, lii | ne |
| | | | | ☐ Schedule G, line | |
| | | | | <u> </u> | |
| | Number Street City | State | ZIP Code | | |
| | O.I.y | Ciaio | 2 0000 | | |
| | | | | Пол | |
| 3.2 | Nama | | | DSchedule D, line | |
| | Name | | | ☐ Schedule E/F, lii | |
| | | | | ☐ Schedule G, line | · |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase. | | | | | | |
|--------------------|---|-------------------------------|--|-----------------------|--------------|-------------------------------|-----------------------------|--------------------------------|
| | otor 1 Staci Marie | _ | | | | | | |
| | otor 2 | | | | | | | |
| Uni | ted States Bankruptcy Court for the | e: NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | |
| | se number nown) | | | | | | ed filing | stpetition chapter ving date: |
| 0 | fficial Form 106I | | | | | MM / DD/ Y | YYY | |
| S | chedule I: Your Inc | ome | | | | | | 12/15 |
| sup spo atta | as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing wi | ng jointly, and your s ith you, do not includ | pouse is e informa | living wit | h you, inclu ut your spo | ude informations. If more s | on about your space is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 or non-filing spouse | | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed | | | ☐ Emplo | oyed | |
| | | Employment status | ☐ Not employed | | | ☐ Not e | mployed | |
| | employers. | Occupation | Banker | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | US Bank | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 430 Main Street Pecatonica, IL 61 | 1063 | | | | |
| | | How long employed the | here? 9 years | | | _ | | |
| Par | t 2: Give Details About Mo | nthly Income | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If y | you have nothing to rep | oort for ar | ny line, wri | te \$0 in the | space. Include | e your non-filing |
| | u or your non-filing spouse have me e space, attach a separate sheet to | | ombine the information | for all em | ployers fo | r that perso | on on the lines | below. If you need |
| | | | | | For De | ebtor 1 | For Debtor non-filing s | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3,454.00 | \$ | N/A |
| 3. | Estimate and list monthly over | time pay. | | 3 | +\$ | 0.00 | +\$ | N/A |

3,454.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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| Deb | tor 1 | Staci Marie Brannon | _ | (| Case | e number (<i>if known</i>) | | | | | |
|-----|-------------------|--|----------------------|------------|--------------------|------------------------------|-------------------|----------------|-----|-------------------|-----------------------------|
| | | | | | | | | | | | |
| | | | | | Fo | r Debtor 1 | | Debto | | | |
| | _ | " 41 | | | | 2.17.1.22 | | n-filing | spo | | |
| | Cop | y line 4 here | 4. | | \$_ | 3,454.00 | \$_ | | | N/A | - |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ì. | \$ | 822.00 | \$ | | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b |). | \$ | 0.00 | \$ | | | N/A | - |
| | 5c. | Voluntary contributions for retirement plans | 5c | : . | \$ | 106.00 | \$ | | | N/A | - |
| | 5d. | Required repayments of retirement fund loans | 5d | i. | \$ | 0.00 | \$ | | | N/A | • |
| | 5e. | Insurance | 5e | €. | \$ | 209.00 | \$ | | | N/A | • |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | \$ | | | N/A | |
| | 5g. | Union dues | 5g | J. | \$ | 0.00 | \$ | | | N/A | - |
| | 5h. | Other deductions. Specify: Dental Insurance | 5h | 1.+ | \$ | 104.00 | + \$ | | | N/A | _ |
| | | Vision Insurance | | | \$_ | 14.00 | \$_ | | | N/A | |
| | | Hearing Insurance | _ | | \$_ | 1.00 | \$_ | | | N/A | |
| | | AD&D Insurance | | | \$_ | 1.00 | \$ | | | N/A | _ |
| | | HSA | _ | | \$_ | 41.00 | \$_ | | | N/A | |
| | | Purchase Vacation | _ | | \$_ | 52.00 | \$_ | | | N/A | |
| | | Tobacco | _ | | \$_ | 54.00 | \$_ | | | N/A | <u> </u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 1,404.00 | \$_ | | | N/A | |
| 7. | Calc | sulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 2,050.00 | \$_ | | | N/A | |
| 8. | 8a. 8b. 8c. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation | 8a 8b 8c 8d |). ;. | \$ \$ - \$ \$ - | 0.00 0.00 0.00 0.00 | \$_ \$_ \$_ | | | N/A N/A N/A | |
| | 8e. | Social Security | 8e | | \$ | 0.00 | \$_ | | | N/A | - |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$_ | 0.00 | \$_ | | | N/A | - |
| | 8g. | Pension or retirement income | 8g | | \$_ | 0.00 | \$_ | | | N/A | |
| | 8h. | Other monthly income. Specify: | _ 8h | 1.+ | \$_ | 0.00 | + \$_ | | | N/A | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | \$_ | 0.00 | \$_ | | _ | N/A | 1 |
| 10. | | tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | | 2,050.00 + \$_ | | N/A | = | \$_ | 2,050.00 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify: | depe | | | • | | Schedul 11. | | _ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | ı. 12. | C | ombir | 2,050.00 ned y income |
| 13. | | you expect an increase or decrease within the year after you file this form? No. | ? | | | | | | | Jiidili, | y mcome |
| | | Ves Evolain: | | | | | | | | | |

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| Fill | I in this information to identify your case: | | | | |
|--------|--|------------------------|-------------|----------------------|-------------------------------|
| Deb | btor 1 Staci Marie Brannon | | Che | eck if this is: | |
| | | _ | | An amended filing | |
| Deb | btor 2 | | | | ving postpetition chapter |
| (Spo | pouse, if filing) | | | 13 expenses as of | the following date: |
| Unit | ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN | NOIS | | MM / DD / YYYY | |
| Cas | se number | | | | |
| (If kı | known) | | | | |
| Of | Official Form 106J | | | | |
| S | chedule J: Your Expenses | | | | 12/15 |
| | as complete and accurate as possible. If two married people a | re filing together, he | oth are equ | ually responsible fo | |
| info | formation. If more space is needed, attach another sheet to this imber (if known). Answer every question. | | | | |
| Par | art 1: Describe Your Household | | | | |
| 1. | Is this a joint case? | | | | |
| | ■ No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses | s for Sanarata Housa | hold of Del | ntor 2 | |
| | Tes. Debiol 2 must me Omolari omi 1000-2, Expense. | s for Separate Flouse | noid of Dei | JIOI 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | □ Yes |
| | · | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | _ | ☐ Yes |
| 3. | Do your expenses include ■ No | | | | |
| | expenses of people other than yourself and your dependents? | | | | |
| | yoursen and your dependents: | | | | |
| | art 2: Estimate Your Ongoing Monthly Expenses | | | | |
| exp | stimate your expenses as of your bankruptcy filing date unless y penses as of a date after the bankruptcy is filed. If this is a supportionable date. | | | | |
| Inc | clude expenses paid for with non-cash government assistance | if you know | | | |
| | e value of such assistance and have included it on Schedule I: | | | | |
| (Off | fficial Form 106l.) | | | Your expe | enses |
| | | | | | |
| 4. | The rental or home ownership expenses for your residence. | Include first mortgage | e 4. | \$ | 425.00 |
| | payments and any rent for the ground or lot. | | ٦. | Ψ | |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. | · | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. | · | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. | | 0.00 |
| _ | 4d. Homeowner's association or condominium dues | oma aguite lear- | | \$ | 0.00 |
| 5. | Additional mortgage payments for your residence, such as ho | ome equity loans | 5. | Φ | 0.00 |

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| Debtor | r 1 Staci Marie Brannon | | Case num | ber (if known) | |
|-------------|--|---|--------------|----------------|-----------------------------|
| 6. U | Jtilities: | | | | |
| 6 | Sa. Electricity, heat, natural gas | | 6a. | \$ | 250.00 |
| 6 | 6b. Water, sewer, garbage collection | | 6b. | \$ | 0.00 |
| 6 | Sc. Telephone, cell phone, Internet, sate | ellite, and cable services | 6c. | \$ | 160.00 |
| 6 | 6d. Other. Specify: | | 6d. | \$ | 0.00 |
| 7. F | ood and housekeeping supplies | | | \$ | 350.00 |
| | Childcare and children's education cos | ts | 8. | \$ | 0.00 |
| | Clothing, laundry, and dry cleaning | | 9. | · | 75.00 |
| | Personal care products and services | | 10. | · - | 60.00 |
| | Medical and dental expenses | | 11. | · <u> </u> | 40.00 |
| | • | hua ar train fara | | Ψ | 40.00 |
| | Fransportation. Include gas, maintenance Do not include car payments. | e, bus of train rate. | 12. | \$ | 100.00 |
| | Entertainment, clubs, recreation, newsp | naners magazines and hooks | 13. | · | 200.00 |
| | Charitable contributions and religious o | - | 14. | · - | 0.00 |
| | nsurance. | ionations | 14. | Ψ | 0.00 |
| | nsurance. Do not include insurance deducted from yo | our pay or included in lines 4 or 20 | | | |
| | 5a. Life insurance | our pay or included in lines 4 UI 20. | 15a. | \$ | 0.00 |
| | 5b. Health insurance | | 15a. 15b. | * | 0.00 |
| | | | | | |
| | 5c. Vehicle insurance | | 15c. | · | 0.00 |
| | 5d. Other insurance. Specify: | | 15d. | D | 0.00 |
| S | Taxes. Do not include taxes deducted from Specify: | n your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| | nstallment or lease payments: | | 4- | • | |
| | 7a. Car payments for Vehicle 1 | | 17a. | · | 0.00 |
| | 7b. Car payments for Vehicle 2 | | 17b. | | 0.00 |
| | | | 17c. | · - | 0.00 |
| | 7d. Other. Specify: | | 17d. | \$ | 0.00 |
| | | e, and support that you did not report as dule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | Other payments you make to support of | | | ¢ | 0.00 |
| | • | iners who do not live with you. | 19. | Ψ | 0.00 |
| | Specify: | led in lines 4 or 5 of this form or on Sche | | our Incomo | |
| | 20a. Mortgages on other property | ieu iii iiiles 4 01 3 01 tilis lottii 01 011 3che | 20a. | | 0.00 |
| | 20b. Real estate taxes | | 20a. 20b. | | |
| | | | | · | 0.00 |
| | 20c. Property, homeowner's, or renter's in | | 20c. | | 0.00 |
| | 20d. Maintenance, repair, and upkeep ex | • | 20d. | | 0.00 |
| | 20e. Homeowner's association or condor | ninium dues | 20e. | \$ | 0.00 |
| 1. O | Other: Specify: Storage Unit | | 21. | +\$ | 65.00 |
| S | Student Loans | | | +\$ | 200.00 |
| lı | nternal Revenue Service payments | 3 | | +\$ | 100.00 |
| _ | | | | | |
| | Calculate your monthly expenses | | | | |
| | 22a. Add lines 4 through 21. | | | \$ | 2,025.00 |
| 2 | 22b. Copy line 22 (monthly expenses for D | Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 2 | 22c. Add line 22a and 22b. The result is y | our monthly expenses. | | \$ | 2,025.00 |
| 3. C | Calculate your monthly net income. | | | | |
| | 23a. Copy line 12 (your combined month) | lv income) from Schedule I. | 23a. | \$ | 2,050.00 |
| | 23b. Copy your monthly expenses from li | | 23b. | · <u> </u> | 2,025.00 |
| ۷. | .ob. Copy your monthly expenses nomin | 110 220 abovo. | 200. | Ψ | 2,023.00 |
| 2 | 23c. Subtract your monthly expenses from | m your monthly income. | | | |
| | The result is your <i>monthly net incom</i> | | 23c. | \$ | 25.00 |
| | • | | | | |
| F | | in your expenses within the year after your car loan within the year or do you expect you | | | se or decrease because of a |
| | ■ No. | | | | |
| | T Ves Explain here: | | | | |

| Fill in this inform | mation to identify your | casa. | | | |
|---------------------|--|-------------------------|-------------------------------|-----------------------------|------------------------------|
| Debtor 1 | Staci Marie Bran | | | | |
| Debior 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | CT OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official Forn | n 106Dec | | | | |
| | | ın Individua | al Debtor's Sc | hedules | 12/15 |
| Sign | n Below | | | | |
| Did you pa | y or agree to pay some | one who is NOT an at | torney to help you fill out b | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | | | Petition Preparer's Notice, |
| | • | | | Declaration, and S | ignature (Official Form 119) |
| Under pena | Itwof periury. I declare | that I have read the su | ummary and schedules filed | d with this declaration and | |
| | e true and correct | Z-01- | , | | |
| × \checkmark | <i>Ĵ [] [] \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</i> | TUMUL | _ X | | |
| | larie Brannon | 91 001=100 | Signature of | Debtor 2 | |
| Signatui | re of Debtor 1 | 10 | | | |
| Date | 2:10 | :18 | Date | | |
| | • . • | | | | |

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| Debor 1 Stace Marie Brannon Pret Name United States Bankruptcy Court for the: Mode Name Last Name Last Name Last Name Last Name United States Bankruptcy Court for the: MORTHERN DISTRICT OF ILLINOIS Case number (Illinoad) Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If Income). Answer every question. PORTITE Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married No thramied 2. During the last 3 years, have you lived anywhere other than where you live now? Debtor 1 Prior Address: Detect 1 Prior Address: Detect 1 Prior Address: Detect 2 Prior Address: Detect 1 Prior Address: Detect 1 Prior Address: Detect 1 Prior Address: Detect 3 Prior Address: Detect 1 Prior Address: Detect 3 Prior Address: Detect 4 Prior Address: Detect 6 Prior 10 Canther Address: Detect 7 Prior Address: Detect 7 Prior Address: Detect 8 Prior 10 Canther Address: Detect 8 Prior 10 Canther Address: Detect 9 Prior Address | | | | | | | |
|--|--------|-------------------|---------------------------------|---------------------------------|-------------------------------------|------------------------------|---|
| Debtor 2 Government Minde Name Last Name Last Name Covernment Covernmen | Fill | in this inform | ation to identify you | r case: | | | |
| Debtor 2 Segment High File Nime Middle Name Last Name | Del | otor 1 | | | LeatMana | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (** through the Case of the Cas | Del | otor 2 | First Name | Middle Name | Last Name | | |
| Case number Check if this is an amended filling Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy Affairs for Individuals Filling for Individuals Filling for Individuals Filling for Support Individuals Filling for Individuals Filling Filling Filling for Individ | | | First Name | Middle Name | Last Name | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy ################################### | Uni | ted States Ban | kruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Debtor 2 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 Prior Prior Address: Dates Debtor 1 | Cas | se number | | | | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? Debtor 1 Prior Address: Dates Debtor 1 Ilived there 3204 Hanover Drive Rockford, IL 61103 2011-062016 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Artzona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Debtor 1 Sources of income Check all that apply. Check all that apply. Check all that apply. Debtor 2 Sources of income (Celtore deductions and exclusions). Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | (if kr | nown) | | | | _ | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before | | | | | | | amended filing |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before | ∩f | ficial Ear | m 107 | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part | | | | Affaire for Individ | duals Filing for B | ankruntov | A144 |
| information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part | | | | | | | |
| Part 15 Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? | info | rmation. If me | ore space is needed, | attach a separate sheet to | | | |
| What is your current marital status? Married | nun | nber (if known |). Answer every que | stion. | | | |
| Married Not married | Pai | t 1: Give D | etails About Your Ma | rital Status and Where You | Lived Before | | |
| No N | 1. | What is your | current marital statu | ıs? | | | |
| 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: | | ☐ Married | | | | | |
| □ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: □ Dates Debtor 1 □ Ived there □ Same as Debtor 1 □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 □ Explain the Sources of Your Income 4. Did you have any income from employment or from operating a businessed during this year or the two previous calendar years? □ Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ Debtor 1 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Sources of income □ Check all that apply. □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips | | ■ Not marr | ried | | | | |
| Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there 3204 Hanover Drive Rockford, IL 61103 Detect 1 Prom-To: 2011-06/2016 Rockford, IL 61103 Rockford, IL 61103 Rockford, IL 61103 Detect 1 Prom-To: 2011-06/2016 Rockford, IL 61103 Detect 1 Prom-To: 2011-06/2016 Rockford, IL 61103 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 2 Prior Address: Ived there Same as Debtor 1 From-To: Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 3 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 3 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 4 Prom-To: Rockford, IL 61103 Detect 4 Prom-To: Rockford, IL 61103 Detect 5 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 6 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Dates Debtor 1 From-To: Rockford, IL 61103 Dates Debtor 2 Sources of income Check all that apply. Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Dates Debtor 1 From-To: Rockford, | 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there 3204 Hanover Drive Rockford, IL 61103 Detect 1 Prom-To: 2011-06/2016 Rockford, IL 61103 Rockford, IL 61103 Rockford, IL 61103 Detect 1 Prom-To: 2011-06/2016 Rockford, IL 61103 Detect 1 Prom-To: 2011-06/2016 Rockford, IL 61103 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 2 Prior Address: Ived there Same as Debtor 1 From-To: Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 3 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 1 Prom-To: Rockford, IL 61103 Detect 2 Prior Address: Ived there Rockford, IL 61103 Detect 3 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 4 Prom-To: Rockford, IL 61103 Detect 4 Prom-To: Rockford, IL 61103 Detect 5 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 6 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Dates Debtor 1 From-To: Rockford, IL 61103 Dates Debtor 2 Sources of income Check all that apply. Rockford, IL 61103 Detect 7 Pame as Debtor 1 From-To: Rockford, IL 61103 Dates Debtor 1 From-To: Rockford, | | П No | | | | | |
| Debtor 1 Prior Address: Dates Debtor 1 Ilved there | | | all of the places you l | ived in the last 3 years. Do no | ot include where vou live now | <i>i</i> . | |
| lived there | | | | , | , | | Datas Dahtan 2 |
| 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips | | Deptor 1 Pri | or Address: | | Deptor 2 Prior Ad | aress: | |
| States and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | | | ☐ Same as Debtor | l | |
| States and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | | | | | |
| No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | | | | | |
| Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | State | es and ternione | es include Anzona, Ca | illomia, idano, Louisiana, Nev | vada, New Mexico, Puerio R | ico, rexas, washington and v | visconsin.) |
| Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No No Sources of income Check all that apply. Debtor 1 Sources of income Check all that apply. Prom January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Sources of income Check all that apply. Wages, commissions, bonuses, tips | | _ | | | | | |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$6,381.99 Wages, commissions, bonuses, tips | | | ke sure you fill out <i>Sci</i> | nedule H: Your Codebtors (Of | fficial Form 106H). | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips | Pai | rt 2 Explain | n the Sources of You | r Income | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips | 4. | Did vou have | any income from er | nplovment or from operatin | a a business during this ve | ear or the two previous cale | ndar vears? |
| No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) From January 1 of current year until bonuses, tips Wages, commissions, bonuses, tips | | Fill in the total | I amount of income yo | ou received from all jobs and a | all businesses, including part | time activities. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$6,381.99 Wages, commissions, bonuses, tips \$6,381.99 | | ii you are iiiiii | g a joint case and you | mave income that you receive | e together, list it offly office di | idel Debloi 1. | |
| Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) | | | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) | | Yes. Fill | in the details. | | | | |
| Check all that apply. Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) The date you filed for bankruptcy: Wages, commissions, bonuses, tips Solutions Solutions The date you filed for bankruptcy: | | | | Debtor 1 | | Debtor 2 | |
| exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | | | | | |
| the date you filed for bankruptcy: bonuses, tips bonuses, tips | | | | опеск ан тат арріу. | | опеск ан тыт арріу. | ` |
| the date you filed for bankruptcy: bonuses, tips bonuses, tips | | | | Wages commissions | \$6,381.99 | ☐ Wages, commissions. | |
| ☐ Operating a business ☐ Operating a business | the | date you filed | d for bankruptcy: | | . , | | |
| | | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Filed 03/15/18 Entered 03/15/18 14:30:14 Desc Main Case 18-80546 Doc 1 Page 35 of 52
Case number (if known) Document

Debtor 1 Staci Marie Brannon

| | | Debtor 1 | | Debtor 2 | |
|-------------------------------|--|---|---|--|---|
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last cale (January 1 t | endar year: o December 31, 2017) | ■ Wages, commissions, bonuses, tips | \$34,615.37 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| | endar year before that: to December 31, 2016) | ■ Wages, commissions, bonuses, tips | \$31,769.48 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| For the cale (January 1 t | endar year: so December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$30,419.55 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| □ No | n source and the gross inc | ome from each source separa | tely. Do not include income th | nat you listed in line 4. | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | rry 1 of current year until u filed for bankruptcy: | Distribution from Pension/Hardship Withdrawal | \$2,000.00 | | |
| For last cale (January 1 t | endar year: o December 31, 2017) | Inheritance (net) | \$3,600.00 | | |
| For the cale (January 1 t | endar year: so December 31, 2015) | Stock Sales | \$1,201.57 | | |
| | | Distribution from Pension | \$733.71 | | |
| Part 3: | st Certain Payments You | u Made Before You Filed for | Bankruptcy | | |
| | er Debtor 1's or Debtor 2 . Neither Debtor 1 nor l | 2's debts primarily consume Debtor 2 has primarily consume a personal, family, or househo | r debts? umer debts. Consumer debts | s are defined in 11 U.S.C. § 10 | 01(8) as "incurred by an |
| | , , | ore you filed for bankruptcy, di | | of \$6.425* or more? | |
| | □ No. Go to line | | , sa pay any broatter a total | . c. 40, 120 of more: | |
| | | each creditor to whom you pareditor. Do not include paymer | | | |

not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Case 18-80546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:30:14 Desc Main Page 36 of 52 Document ase number (if known) Debtor 1 Staci Marie Brannon Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ☐ Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened Fifth Third Bank 3204 Hanover Drive, Rockford, IL 61101 06/2016 Unknown

Official Form 107

☐ Property was attached, seized or levied.

□ Property was repossessed.■ Property was foreclosed.□ Property was garnished.

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| | Ousc 10 00540 | DUCI | 1 1100 00/13/10 | Littered 00/10/10 14:00:14 | DC3C Main |
|----------|---------------------|------|-----------------|----------------------------|-----------|
| | | | Document | Page 37 of 52 | |
| Debtor 1 | Staci Marie Brannon | | | Case number (if known) | |

| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details. | | did any creditor, including a bank or financial in: you owed a debt? | stitution, set off any a | mounts from your |
|-----|--|--------|--|---|---------------------------|
| | Creditor Name and Address | Des | scribe the action the creditor took | Date action was taken | Amount |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a ■ No □ Yes | | as any of your property in the possession of an er official? | assignee for the bene | efit of creditors, a |
| Par | t 5: List Certain Gifts and Contributions | | | | |
| | | | lid you give any gifts with a total value of more t | han \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | |
| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co | | lid you give any gifts or contributions with a tota on. | al value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | tal | Describe what you contributed | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? | tcy or | since you filed for bankruptcy, did you lose any | thing because of thef | t, fire, other disaster, |
| | ■ No □ Yes. Fill in the details. | | | | |
| | how the loss occurred | nclude | be any insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | | | | |
| 16. | consulted about seeking bankruptcy or pr | eparir | d you or anyone else acting on your behalf pay on g a bankruptcy petition? s, or credit counseling agencies for services require | | rty to anyone you |
| | □ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | u | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Bernard J Natale, Ltd Edgebrook Office Center 1639 N. Alpine Road, Suite 401 Rockford, IL 61107 | | Attorney Fees and Costs | 02/2018 | \$1,085.00 |

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Debtor 1 Staci Marie Brannon

| 17. | Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo | ors or to make payments | | | erty to anyone who |
|----------------|---|--|---|---|---|
| | No | | | | |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | Description and v transferred | alue of any proper | or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details. | ousiness or financial affa ade as security (such as t | i irs? he granting of a sec | | |
| | Person Who Received Transfer Address | Description and v property transferr | | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| | Person's relationship to you | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details. | 3. | y property to a sel | f-settled trust or similar device | e of which you are a |
| | Name of trust | Description and v | alue of the proper | ty transferred | Date Transfer was made |
| Par 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, assolution of Figure 1 to the details. | cy, were any financial acc or other financial accour ciations, and other finan | counts or instruments; certificates of cial institutions. | ents held in your name, or for y deposit; shares in banks, cred | lit unions, brokerage |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | or Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. | year before you filed for | bankruptcy, any s | afe deposit box or other depo | sitory for securities, |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, State and ZIP Code) | | escribe the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit o No Yes. Fill in the details. | or place other than your | home within 1 yea | ar before you filed for bankrup | tcy? |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, State and ZIP Code) | | scribe the contents | Do you still have it? |
| | A Spot to Drop Storage Inc 632 Grable Street Rockford, IL 61109 | Stacie Brannon 9117 E Maize Ro Ridott, IL 61067 | d ro fu | ven, family pictures, dining om table, clothing, broken rniture (approximately 100.00) | □ No ■ Yes |

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Case number (if known) Document

Debtor 1 Staci Marie Brannon

| Pa | rt 9: Identify Property You Hold or Control for | Someone Else | | | | | |
|-----|--|---|-------|--|-----------------------|--|--|
| 23. | Do you hold or control any property that someofor someone. | ne else owns? Include any prope | rty y | ou borrowed from, are storing for | , or hold in trust | | |
| | □ No■ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | scribe the property | Value | | |
| | John Hitchcock 9117 E. Maize Road Ridott, IL 61067 | 9117 E. Maize Road Ridott, IL 61067 | an | ebtor lives with Boyfriend nd has use of his personal operty and vehicle | Unknowr | | |
| Pa | rt 10: Give Details About Environmental Informa | ation | | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the airegulations controlling the cleanup of these substances. | ir, land, soil, surface water, groun | _ | • | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | | law, | , whether you now own, operate, o | or utilize it or used | | |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s | | s wa | ste, hazardous substance, toxic s | substance, | | |
| Rep | port all notices, releases, and proceedings that yo | ou know about, regardless of whe | n the | ey occurred. | | | |
| 24. | Has any governmental unit notified you that you | ı may be liable or potentially liable | e und | der or in violation of an environme | ental law? | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State ar ZIP Code) | nd | Environmental law, if you know it | Date of notice | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State ar ZIP Code) | nd | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or adminis | · | riron | mental law? Include settlements a | and orders. | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case | | |
| Pa | rt 11: Give Details About Your Business or Con | nections to Any Business | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, o | did you own a business or have a | ny o | f the following connections to any | business? | | |
| | ☐ A sole proprietor or self-employed in a t | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or | equity securities of a corporation | ı | | | | |

Case 18-80546 Doc 1 Filed 03/15/18 Entered 03/15/18 14:30:14 Page 40 of 52 number (if known) Document Debtor 1 Staci Marie Brannon No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο ☐ Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have reach the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection ruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. Signature of Debtor 2 Staef Marie Brannor Signature of Debtor **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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| Debtor 1 | Staci Marie Br | annon | | |
|--------------------|----------------|-------------|-----------|-----------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Case number | | | | ☐ Check if this is a |
| if known) | | | | ☐ Check if this is ar |
| | | | | amended filing |

Statement of intention for individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|---|---|
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Staci Marie Brannon | Case number (if known) | | | |
|---|--|---------------------------------------|--|--|
| name: Description of property securing debt: | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes | | |
| in the information below. Do not list real estate | rty Leases I you listed in Schedule G: Executory Contracts and Unex I leases. Unexpired leases are leases that are still in effect rty lease if the trustee does not assume it. 11 U.S.C. § 365 | ; the lease period has not yet ended. | | |
| Describe your unexpired personal property lea | ases (2), 420, 450, 500 TEC 1270 (40, 40, 40, 40) | Will the lease be assumed? | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Staci Marie Brannon Signature of Debtor 1 | ndicated my intention about any property of my estate that X Signature of Debtor 2 | | | |
| Date 3 · 15 · 18 | Date | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

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United States Bankruptcy Court Northern District of Illinois

| In re | Staci Marie Brannon | | Case No. | | |
|------------------|--|---|---|---------------------------|--|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPEN | NSATION OF ATTO | DRNEY FOR D | EBTOR(S) | |
| C | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016() ompensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation o | g of the petition in bankrupto | y, or agreed to be paid | to me, for services rend | lered or to |
| | For legal services, I have agreed to accept | | \$ | 750.00 | |
| | Prior to the filing of this statement I have received | | \$ | 750.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. \$ | 335.00 of the filing fee has been paid. | | | | |
| 3. 7 | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| ı. 1 | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compe | ensation with any other perso | on unless they are men | bers and associates of n | ny law firm. |
| 1 | ☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name | | | | v firm. A |
| 5. 1 | n return for the above-disclosed fee, I have agreed to rer | nder legal service for all aspo | ects of the bankruptcy | case, including: | |
| a t c c | Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of creditor | ement of affairs and plan whi rs and confirmation hearing, | ch may be required; and any adjourned he | | ptcy; |
| 7. F | By agreement with the debtor(s), the above-disclosed fee | does not include the following | ing service: | | |
| | | CERTIFICATION | | | 24 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
| | certify that the foregoing is a complete statement of any ankruptcy proceeding. | agreement or arrangement | for payment to me for | representation of the deb | otor(s) in |
| uns o | | 7 | ed & Note | - | |
| | 3/15/18 | Bernard J. Nata | ale 2018683 Illinoi: | | · |
| D | ne / | Signature of Attor | | | |
| | | Bernard J. Nata | | | |
| | | Edgebrook Offi | ice Center Road, Suite 401 | | |
| | | Rockford, IL 61 | | | |
| | | | Fax: (815) 316-464 | 6 | |
| | | natalelaw@bjn | | | |
| | | Name of law firm | | | |

Chapter 7 Bankruptcy Fee Agreement

Federal law requires the execution of a written agreement between attorney and client for Bankruptcy representation. Signing this agreement shall engage the services of *Bernard J. Natale*, *Ltd.*, hereinafter "Attorney" for Bankruptcy representation pursuant to Title 11, United States Code.

Whereas, STACI BRANNON desires to engage the services of Attorney to represent client's interest in connection with Bankruptcy Proceedings, to be filed within four (4) months of this Agreement, Attorney and client do hereby agree:

- 1. Client shall pay to Attorney for the services described below in paragraph 2, the base fee of \$ 750.00 plus costs of \$335.00, prior to case filing.
- 2. The Attorney base fee shall include services rendered *pre-petition* as follows: Attorney shall interview client, analyze, prepare and file a Chapter 7 Bankruptcy Petition and appear at the first meeting of creditors held pursuant to 11 U.S.C. 341. Attorney shall further review and advise with respect to reaffirmation agreements. Whether or not a Chapter 7 bankruptcy petition is filed, all fees paid are not refundable.
- 3. After the filing of a Chapter 7 Bankruptcy Petition, as contemplated herein, any other services provided by Attorney deemed necessary and incidental to the bankruptcy proceeding shall be considered post-petition services not contemplated by the fee agreed to in paragraph 1. The base fee does not include preparation of amendments to Bankruptcy Schedules, including, but not limited to, amended schedules to add creditors not listed in the original petition. These services will be billed at Attorney's hourly rate plus cost of Court filing fees.
- 4. The base fee does not include representation in any post-petition services which may occur, including, but not limited to, court appearances for dischargeability issues, judicial lien avoidances, relief from stay actions, or any adversary proceedings. These services will be billed at **Attorney**'s hourly rate plus cost of Court filing fees, client will be billed and, by signature below, agrees to pay, post-petition.
- 5. The failure of client to pay for post-petition services when the same become due and payable, as set forth above, shall constitute cause for Attorney to withdraw as attorney of record and cease all further services to client. Any withdrawal as attorney for client shall not be deemed a waiver of fees due and payable. Client agrees to pay all reasonable costs of collection of any unpaid fees and costs, including reasonable attorney fees incurred in collection.
- 6. By executing this agreement, client agrees that she has had an opportunity to discuss the agreement with **Attorney**, has asked any questions that have arisen, and has received understandable explanations for the questions, and is fully aware of the information contained herein.

| 7. | ☐ If the Debtor is any entity other than individuals, those individuals signing this contract on |
|----|--|
| | behalf of Debtor as client, does hereby personally guarantee payment of fees. |

CLIENT Date:

Date:

1-3/-18

BERNARD J. NATALE, LTD.

By: Folg Non

CLIENT

Date:

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United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Illinois | | |
|-------|---|-------------------------------|-----------|----|
| In re | Staci Marie Brannon | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | VERIFICATION OF CREDITOR MATRIX | | | |
| | | Number of Creditors: | | 24 |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | |
| Date: | 3.15.18 | Staci Marie Brannon | Branner | |

Signature of Debtor

Bell Capital PO Box 1962 Alpharetta, GA 30004-1942

Capital Management Services, LP 698 1/2 S. Ogden Street Buffalo, NY 14206-2317

City of Rockford P.O. Box 1221 Rockford, IL 61105

Creditors Protection Service Inc 308 W State Street Suite 485 Rockford, IL 61110-0615

Creditors Protection Services, Inc. 308 W. State Street, Suite 485 PO Box 4115 Rockford, IL 61101

Enhanced Recovery Corporation PO Box 57547 Jacksonville, FL 32241

Federal LoanServicing Credit PO Box 60610 Harrisburg, PA 17106

Fifth Third Bank 5050 Kingsley Drive MD1MOC2 Cincinnati, OH 45263

First National Collection Bureau 610 Waltham Way Sparks, NV 89434

Harris & Harris, Ltd. 111 W. Jackson Blvd Suite 400 Chicago, IL 60604 Internal Revenue Service Centralized Insolvency PO Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service Mail Stop 5013 CHI 230 S. Dearborn St. Chicago, IL 60604

OrthoIllinois PO Box 78620 Milwaukee, WI 53278-8620

Portfolio Recovery Associates LLC P.O. Box 12914 Norfolk, VA 23541

Rock River Water Reclamation Dist 3501 Kishawukee Street Rockford, IL 61109

Rockford Health Medical Lab. PO Box 138 Rockford, IL 61105-3619

Rockford Health Physicians 2300 N. Rockton Avenue Rockford, IL 61103

Rockford Mercantile Agency 2502 S. Alpine Road Rockford, IL 61108

Southwest Credit Systems, LP 4120 International Parkway Suite 1100 Carrollton, TX 75007-1958

SSM Health/St. Claire Hospital Patient Business Services PO Box 28205 Saint Louis, MO 63132 State Collection Service PO Box 6250 Madison, WI 53716-0250

States Recovery Systems Inc 2491 Sunrise Blvd Rancho Cordova, CA 95670-4344

Stellar Recovery PO Box 48370 Jacksonville, FL 32247

Synchrony Bank/Walmart Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060